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CONFIRMATION NO. 9553

<b>SERIAL NUMBER</b> 10/566,882	<b>FILING OR 371(c) DATE</b> 02/01/2006 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> 08641-035US1 21005US ESS
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

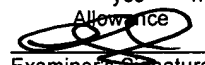
This application is a 371 of PCT/FR04/02008 07/27/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 03/09787 08/08/2003

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/14/2006

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature:  Initials: _____				

## ADDRESS

26161

## TITLE

Method for determination of an ophthalmic lens using an astigmatism prescription for far sight and for near sight

<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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